POSITION	INITIALS	ID NO.	DATE
	C=+1		10-17-01
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			1 1
FORMALITY REVIEW	<i>()</i>	1128	11/28/01
RESPONSE FORMALITY REVIEW	fi	1019	03.18.02

## INDEX OF CLAIMS

J	Rejected	N	Non-elected
	Allowed	1	Interference
	(Through numeral) Canceled	Α	Appeal
			Objected

		Claim Data	
Claim Date	Claim Date	Claim Date	_
Final Original	Original	Final	
	51	101	$\perp$
2 V	52	102	-
- 3 V	53	103	+
4 🗸	54	104	+
5 🗸	55	105	-
6 V	56	106	+
7 V	57	108	+
8 🗸	58		+
9 🗸	59	1109	+
10 🗸	60	+++++++++++++++++++++++++++++++++++++++	╁
11V	61	112	+
12 V	62	113	+
13 🗸	63	1114	+
14 0	65	115	十
15 /	66	116	$\neg$
16 V	67	<del></del>	1
17 /	68	118	$\neg$
18 (/	69	119	$\top$
19 0	70	120	$\top$
20 🗸	<del></del>	121	+
21	71	122	7
(23)	72 73		4
23 /	74	124	
24 /	75	125	$\sqcap$
25 (/	76	126	
26 🗸	777	127	$\sqcap$
27 V 28 V	78	128	
\\_ <del>\_\_\_\_\</del>	79	129	
	80	130	$\Box$
30 1	81	131	
32 0	82	132	
, 33 V	83	133	Ц
34 🗸	84	134	
35 1	85	135	$\sqcup$
36 \	86	136	Ш
37	87	137	$\sqcup$
38 (/	88	138	$\vdash$
39 0	89	139	$\sqcup$
(43) V	90	140	$\sqcup$
41 0	91	141	Ш
		142	Ш
42 V	92 93	143	$\sqcup$
144	94	144	Ш
/ 45	95	145	Ш
	96	146	$\sqcup$
46 47	97	147	$\sqcup$
	98	148	$\sqcup$
49	99	149	$\sqcup$
50	100	150	ш

Best Available Conv

If mor than 150 claims or 10 actions staple additional sheet here

(LEFT INSIDE)

10 /6

3.00 B